

TAB 6

Town of Lake Park Town Commission
Agenda Request Form

Meeting Date: January 4, 2006

Agenda Item No. 6

- ☐ PUBLIC HEARING
☐ Ordinance on Second Reading
☐ Public Hearing

☐ RESOLUTION

☒ DISCUSSION

☐ ORDINANCE ON FIRST READING

☐ BID/RFP AWARD

☐ GENERAL APPROVAL OF ITEM

☐ CONSENT AGENDA

☐ Other:

SUBJECT: Consideration of applications for the Lake Park Harbor Marina Advisory Board.

RECOMMENDED MOTION/ACTION: Commission Contingency.

Approved by Town Clerk

Stephan Thomas

Date:

12/30/05

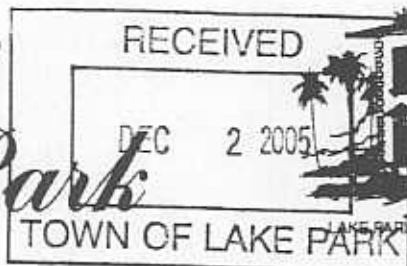
Originating Department: Clerks Office	Costs: \$ NA Funding Source: Acct. #	Attachments: Board applications
Department Review: <input type="checkbox"/> City Attorney _____ <input type="checkbox"/> Community Affairs _____ <input type="checkbox"/> Community Development _____	<input type="checkbox"/> Finance _____ <input type="checkbox"/> Fire Dept _____ <input type="checkbox"/> Library _____ <input type="checkbox"/> PBSO _____	<input type="checkbox"/> Personnel _____ <input type="checkbox"/> Public Works _____ <input checked="" type="checkbox"/> Town Clerk <i>Stephan Thomas</i> <input type="checkbox"/> Town Manager _____
Advertised: Date: _____ Paper: _____ <input type="checkbox"/> Not Required	All parties that have an interest in this agenda item must be notified of meeting date and time. The following box must be filled out to be on agenda.	Yes I have notified everyone _____ or Not applicable in this case <u>SLT</u> : Please initial one.

Summary Explanation/Background:

See attachments.

Board Appointment(s)

The Town of Lake Park



"Jewel" of the Palm Beaches

Application to Serve on Town Boards and Committees

This application serves as an information file of the skills, talents and interests of citizens who are willing to serve on advisory boards and committees for the Town of Lake Park. When an opening occurs on one of the Boards on which you have indicated a desire to serve, your application will be submitted to the Town Commission. You will be notified by mail when appointment has been made.

Please print or type the following information:

Name: GRAPE JERRY W.
Last First Middle Initial

Address: 700 US 1 LAKE PARK FLORIDA

Telephone: 561-626-4569 home 561-626-4569 work

	Yes	No
Are you a resident of Lake Park	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you a non-resident business owner in Lake Park	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you a registered voter (Response to this question is not mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you currently serve on a Town Board or Committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, which one(s): _____		
Have you been convicted of a crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, when? _____ where? _____		

Please indicate your preference by numbers "1" through "5" of no more than five boards on which you wish to serve, with #1 being the most desired and #5 being the least desired.

Choice #	Board	Choice #	Board
<input type="checkbox"/>	Board of Adjustment*	<input type="checkbox"/>	Pension Trust Fund (Fire)
<input type="checkbox"/>	Code Compliance*	<input type="checkbox"/>	Pension Trust Fund (Police)
<input type="checkbox"/>	Education Advisory Board	<input type="checkbox"/>	Planning & Zoning/ Historic Preservation Board *
<input type="checkbox"/>	Library Board	<input type="checkbox"/>	Town Tree Board
<input type="checkbox"/>	CRA Board	<input type="checkbox"/>	Merit Board*
<input checked="" type="checkbox"/>	Marina Development Control Bd.	<input type="checkbox"/>	Other _____

Please note: Membership on these (*) Boards requires members to complete an annual financial disclosure form pursuant to F.S. 112.3145(1)(a), (2)(b), (7)

Your Name: JERRY W. KRAPE

Please indicate the reason for your interest in your first and second choices:

I CARE ABOUT THE FUTURE OF THE
MAINA & LAKE PARK - I WISH TO
KEEP PROPERTY VALUES HIGH

Number of Meetings of the above boards you have attended in the past six months: _____

Your Educational Background: (High School, College, Graduate School or other training)

D.D.S. - DENTIST

What is/was your profession or occupation? DENTIST

How long? 40 YEARS

Please indicate employment experience that you feel relates to your desired service on an Advisory Board or Committee: SERVED 3 YRS. ON

MAINA BOARD

Please indicate other general experience or community involvement that you feel qualifies you to serve on the boards you have chosen: avid BOATER

AND FISHERMAN - HAVE 39' SPORT FISHER

Feel free to attach additional sheets if required. Also, please attach your resume, if available.

Please return your completed form to the Office of the Town Clerk, 535 Park Avenue, Lake Park, Florida 33403

I HEREBY CERTIFY THAT THE STATEMENTS AND ANSWERS PROVIDED ARE TRUE AND ACCURATE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE CAUSE FOR REMOVAL FROM A BOARD OR COMMITTEE, IF APPOINTED.

Signature: Jerry W. Krape

Date: 12-2-05

The Town of Lake Park



LAKE PARK TOWN HALL

NATIONAL HISTORIC SITE

"Jewel" of the Palm Beaches

Application to Serve on Town Boards and Committees

This application serves as an information file of the skills, talents and interests of citizens who are willing to serve on advisory boards and committees for the Town of Lake Park. When an opening occurs on one of the Boards on which you have indicated a desire to serve, your application will be submitted to the Town Commission. You will be notified by mail when appointment has been made.

Please print or type the following information:

Name: FRIEL Scott J.
Last First Middle Initial

Address: 214 E. JASMINE DR. LAKE PARK FL 33403

Telephone: 561 845 6423 home _____ work _____

	Yes	No
Are you a resident of Lake Park	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you a non-resident business owner in Lake Park	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you a registered voter (Response to this question is not mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you currently serve on a Town Board or Committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, which one(s): _____		
Have you been convicted of a crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, when? _____ where? _____		

Please indicate your preference by numbers "1" through "5" of no more than five boards on which you wish to serve, with #1 being the most desired and #5 being the least desired.

Choice #	Board	Choice #	Board
<input type="checkbox"/>	Board of Adjustment*	<input type="checkbox"/>	Pension Trust Fund (Fire)
<input type="checkbox"/>	Code Compliance*	<input type="checkbox"/>	Pension Trust Fund (Police)
<input type="checkbox"/>	Education Advisory Board	<input type="checkbox"/>	Planning & Zoning/ Historic Preservation Board *
<input type="checkbox"/>	Library Board	<input type="checkbox"/>	Town Tree Board
<input type="checkbox"/>	CRA Board	<input type="checkbox"/>	Merit Board*
<input type="checkbox"/> /	Marina Development Control Bd.	<input type="checkbox"/>	Other _____

Please note: Membership on these (*) Boards requires members to complete an annual financial disclosure form pursuant to F.S. 112.3145(1)(a), (2)(b), (7)

Your Name: SCOTT J. FRIEL

Please indicate the reason for your interest in your first and second choices:

I AM A BOAT OWNER, FREQUENTLY USING
MARINA (LAKE PARK MARINA) FACILITIES

Number of Meetings of the above boards you have attended in the past six months: 1

Your Educational Background: (High School, College, Graduate School or other training)

ASSOC OF SCIENCE

What is/was your profession or occupation? RESPIRATORY THERAPIST
How long? 18 YEARS

Please indicate employment experience that you feel relates to your desired service on an Advisory Board or Committee: WORK WITH GROUPS.

ESTABLISHING COMMITTEE LONG TERM CARE UNIT, CHILDRENS
HOSPITAL ST PAUL MNO

Please indicate other general experience or community involvement that you feel qualifies you to serve on the boards you have chosen: BOAT OWNER, FREQUENT

MARINA CUSTOMER, STARTED BUSINESS IN MINNEAPOLIS.

Feel free to attach additional sheets if required. Also, please attach your resume, if available.

Please return your completed form to the Office of the Town Clerk, 535 Park Avenue, Lake Park, Florida 33403

I HEREBY CERTIFY THAT THE STATEMENTS AND ANSWERS PROVIDED ARE TRUE AND ACCURATE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE CAUSE FOR REMOVAL FROM A BOARD OR COMMITTEE, IF APPOINTED.

Signature: Scott J. Friel

Date: 8-4-05

The Town of Lake Park



LAKE PARK TOWN HALL

NATIONAL HISTORIC SITE

"Jewel" of the Palm Beaches

Application to Serve on Town Boards and Committees

This application serves as an information file of the skills, talents and interests of citizens who are willing to serve on advisory boards and committees for the Town of Lake Park. When an opening occurs on one of the Boards on which you have indicated a desire to serve, your application will be submitted to the Town Commission. You will be notified by mail when appointment has been made.

Please print or type the following information:

Name: McDow William P.
Last First Middle Initial
Address: 220 US Hwy 1, LAKE PARK (BOG)
Telephone: 561 848 4484 work 248 4406 cell work

	Yes	No
Are you a resident of Lake Park	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are you a non-resident business owner in Lake Park	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you a registered voter (Response to this question is not mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you currently serve on a Town Board or Committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, which one(s): _____		
Have you been convicted of a crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, when? _____ where? _____		

Please indicate your preference by numbers "1" through "5" of no more than five boards on which you wish to serve, with #1 being the most desired and #5 being the least desired.

Choice #	Board	Choice #	Board
<input type="checkbox"/>	Board of Adjustment*	<input type="checkbox"/>	Pension Trust Fund (Fire)
<input type="checkbox"/>	Code Compliance*	<input type="checkbox"/>	Pension Trust Fund (Police)
<input type="checkbox"/>	Education Advisory Board	<input type="checkbox"/>	Planning & Zoning/ Historic Preservation Board *
<input type="checkbox"/>	Library Board	<input type="checkbox"/>	Town Tree Board
<input type="checkbox"/>	CRA Board	<input type="checkbox"/>	Merit Board*
<input checked="" type="checkbox"/>	Marina Development Control Bd.	<input type="checkbox"/>	Other _____

Please note: Membership on these (*) Boards requires members to complete an annual financial disclosure form pursuant to F.S. 112.3145(1)(a), (2)(b), (7)

Your Name: William M. Dow

Please indicate the reason for your interest in your first and second choices:

WORK IN THE BOATING INDUSTRY

Number of Meetings of the above boards you have attended in the past six months: 0 ^{THEY} ~~KEPT BE~~
Your Educational Background: (High School, College, Graduate School or other training) ~~CANCELLED~~

What is/was your profession or occupation? BOAT CAPTAIN, BAIT & TACKLE
How long? 35 YRS STORE OWNER

Please indicate employment experience that you feel relates to your desired service on an Advisory Board or Committee: BOAT CAPTAIN, HAVE SPENT MORE
TIME IN MARINAS THEN AT HOME

Please indicate other general experience or community involvement that you feel qualifies you to serve on the boards you have chosen: STORE OWNER,
HAVE RUN OVER 30 FISHING TOURNAMENTS

Feel free to attach additional sheets if required. Also, please attach your resume, if available.

Please return your completed form to the Office of the Town Clerk, 535 Park Avenue, Lake Park, Florida 33403

I HEREBY CERTIFY THAT THE STATEMENTS AND ANSWERS PROVIDED ARE TRUE AND ACCURATE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE CAUSE FOR REMOVAL FROM A BOARD OR COMMITTEE, IF APPOINTED.

Signature: William M. Dow

Date: 4/5/05

The Town of Lake Park



LAKE PARK TOWN HALL

NATIONAL HISTORIC SITE

"Jewel" of the Palm Beaches

Application to Serve on Town Boards and Committees

This application serves as an information file of the skills, talents and interests of citizens who are willing to serve on advisory boards and committees for the Town of Lake Park. When an opening occurs on one of the Boards on which you have indicated a desire to serve, your application will be submitted to the Town Commission. You will be notified by mail when appointment has been made.

Please print or type the following information:

Name: Wexler Joseph H
Last First Middle Initial

Address: 1601 Flagler Blvd.

Telephone: 841-8245 home _____ work _____

	Yes	No
Are you a resident of Lake Park	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are you a non-resident business owner in Lake Park	<input type="checkbox"/>	<input type="checkbox"/>
Are you a registered voter (Response to this question is not mandatory)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Do you currently serve on a Town Board or Committee	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, which one(s): _____		
Have you been convicted of a crime	<input type="checkbox"/>	<input checked="" type="checkbox"/>
If so, when? _____ where? _____		

Please indicate your preference by numbers "1" through "5" of no more than five boards on which you wish to serve, with #1 being the most desired and #5 being the least desired.

Choice #	Board	Choice #	Board
<input type="checkbox"/>	Board of Adjustment*	<input type="checkbox"/>	Pension Trust Fund (Fire)
<input type="checkbox"/>	Code Compliance*	<input type="checkbox"/>	Pension Trust Fund (Police)
<input type="checkbox"/>	Education Advisory Board	<input type="checkbox"/>	Planning & Zoning/ Historic Preservation Board *
<input type="checkbox"/>	Library Board	<input type="checkbox"/>	Town Tree Board
<input type="checkbox"/>	CRA Board	<input type="checkbox"/>	Merit Board*
<input checked="" type="checkbox"/>	Marina Development Control Bd.	<input type="checkbox"/>	Other _____

Please note: Membership on these (*) Boards requires members to complete an annual financial disclosure form pursuant to F.S. 112.3145(1)(a), (2)(b), (7)

Your Name:

Joseph Wexler

Please indicate the reason for your interest in your first and second choices:

Have attended several Marina Board meetings and am most interested in the success of the new Marina.Number of Meetings of the above boards you have attended in the past six months: 1

Your Educational Background: (High School, College, Graduate School or other training)

B.A. Psychology, CW Post College 1970, M.S. Organizational Psych. U of Tennessee

What is/was your profession or occupation?

Management Consultant

How long?

15 years

Please indicate employment experience that you feel relates to your desired service on an Advisory Board or Committee:

Lead and served on dozens of committees over last 30 years.

Please indicate other general experience or community involvement that you feel qualifies you to serve on the boards you have chosen:

30 years of boat ownership and Marina usage. U.S.C.G. 100 Ton Masters Licence.

Feel free to attach additional sheets if required. Also, please attach your resume, if available.

Please return your completed form to the Office of the Town Clerk, 535 Park Avenue, Lake Park, Florida 33403

I HEREBY CERTIFY THAT THE STATEMENTS AND ANSWERS PROVIDED ARE TRUE AND ACCURATE. I UNDERSTAND THAT ANY FALSE STATEMENTS MAY BE CAUSE FOR REMOVAL FROM A BOARD OR COMMITTEE, IF APPOINTED.

Signature: _____

Date: _____

BALLOT

MAYOR/COMMISSIONER

PLEASE BE ADVISED THAT THERE IS ONLY ONE VACANCY ON THE LAKE PARK HARBOR MARINA BOARD. AFTER REVIEWING THE APPLICATION, PLEASE ONLY CAST ONE VOTE FOR THE PERSON YOU FEEL IS MOST QUALIFIED TO SERVE ON THE TOWN'S ADVISORY BOARD.

<u>Applicant(s):</u>	<u>Yes</u>	<u>No</u>
Dr. Jerry Krape	_____	_____
Scott Friel	_____	_____
William Mc Dow	_____	_____
Joseph Wexler	_____	_____